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149-5479

Telephone:

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| I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). | | | | | | | |
|--|-------------------------|------|------------------------|---|-------|--------------------|------------------------|
| Hereby appoint: ☐ Practitioners associated with the Customer Number: ☐ OR ☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): | | | | | | | |
| | | Name | Registration Number | 8 | Name | | Registration Number |
| | | | | | | | |
| as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordinace with 37 CPR 37(s)b. | | | | | | | |
| Please change the correspondence address for the application identified in the attached statement under 37 CFR 3 The address associated with Customer Number: 24353 | | | | | | nder 37 CFR 3.73(b |) to: |
| OR | Firm or individual Name | | | | | | |
| Addre | ess | | | | | | |
| City | | | State | | Zip | | |
| Coun | | | | | | | |
| Telep | hone | | | | Email | | |
| Assignee Name and Address: Abbott Diabetes Care, Inc. 1420 Harbor Bay Parkway, Suite 290 Alameda, California 94502 | | | | | | | |
| A copy of this form, together with a statement under 37 CFR 3.7(b) (Form PTOSBIRS or equivalent) is required to be filled in sach application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. | | | | | | | |

Title Chick of Information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPT to process) are guidants. Confidentially is governed by 35 US. C. 22 and 37 CFR 1.11 and 1.14. This objection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the only of the signal of the complete complete the signal of the complete the complete the complete formation of the complete the complete formation of the complete the complete the signal of the complete the complete the complete the signal of the complete the complete the complete the signal of the complete the comp Title

SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Signature

Name